PTO/SB/17 (01-06)
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s pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if						
FEE TRANSMITTAL			Application Number Filing Date			10/814,632-Conf. #7560					
FEE TRANSMITTAL For FY 2006				·onto-	April 1, 2004						
6/ FOFFY 2006			First Named Inventor Examiner Name			Bret Sabold S. A. Weaver					
Applicant claims small entity status. See 37 CFR 1.27							3727	avei		<del> </del>	
TOTAL AMOUNT OF PA	· · · · · · · · · · · · · · · · · · ·	\$) 0.00		Art Unit Attorney		No	29953-19	99349			
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FEE CALCULATION	(All the fees b	elow are d	ue upo	n filing (	or may	be subj	ect to a s	urcharg	e.)		
1. BASIC FILING, SEAR	CH, AND EXAM	INATION FE	E\$					=			
		FEES Small Entity	SE	ARCH F		EXAM	NATION I				
Application Type	Fee (\$)	Fee (\$)	Fee (\$		I Entity e (\$)	Fee (\$)	Small E Fee (		Fees I	Paid (\$)	
Utility	300	150	500		:50	200	100				
Design	200	100	100		50	130	65	5			
Plant	200	100	300	1	50	160	80	_			
Reissue	300	150	500	2	50	600	300	) –			
Provisional	200	100	0		0	0	(	) _			
2. EXCESS CLAIM FEES	6									Small Entity	
Fee Description								<u>F</u>	<u>ee (\$)</u>	<u>Fee (\$)</u>	
Each claim over 20 (included) Each independent claim		Daisauss)							50	25	
Multiple dependent clain		( Reissues)							200	100	
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5 - 8 = HP = highest numer of indepe	andent claims paid fo	r, if greater than	3.								
3. APPLICATION SIZE F											
If the specification and	drawings exceed	100 sheets of	of paper	(excludin	g electr	onically f	iled sequer	nce or con	nputer		
listings under 37 CFl sheets or fraction the	R 1.52(e)), the appropriate 1.52(e)	oplication siz	ze fee du	e is \$250	(\$125 f	for small e	entity) for e	ach addit	tional 50	0	
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4. OTHER FEE(S)	·			, <b>-</b>					Fees	Paid (\$)	
Non-English Specifica	ation, \$130 fee	(no small en	tity disco	ount)							
Other (e.g., late filing	surcharge):		-								
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Signature Registration No. (Attorney/Agent) 42,709 Telephone (202) 344-4000  Name (Print/Type) Date 6/29/06	SUBMITTED BY	_/)	<u> </u>				
Name (Print/Type) Jeffr/A. Kaminski Date 6/29/06	Signature	1/2	MI	4///	42,709	Telephone	(202) 344-4000
	Name (Print/Type)	yelly/f	(C Kamins	ski		Date 6/	29/06